IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

OLIFF & BERRIDGE, PLC P.O. Box 19928

Alexandria, Virginia 22320 Telephone: (703) 836-6400 Facsimile: (703) 836-2787

Attorney Docket No.: 116614

Date: July 16, 2003

MAIL STOP PATENT APPLICATION

Customer Number: 25944

NONPROVISIONAL APPLICATION TRANSMITTAL RULE \$1.53(b)

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Transmitted herewith for filing under 37 C.F.R. §1.53(b) is the nonprovisional patent application

For (Title):		IMAGE READ APPARATUS
By (Inventors):		Atsushi YOKOCHI
	☐ Use Figure A Declaration an This application (A Preliminary A This patent appli ☐ The execute An Information I Entitlement to sn A Preliminary A Priority of foreig in Japan is claim ☐ A certified c This application the invention dis country, or undes	(Figs. 1-15: 15 sheets) are attached. for front page of Publication. der of Provisional Application No. filed membernet is attached to reflect this claim in the Specification if not already present.) deathon is assigned to Brother Kogyo Kabushiki Kaisha. d Assignment is filed herewith. Sicclosure Statement is filed herewith. hall entity status is hereby asserted. memdenent is filed herewith. na pplications No. 2002-211223 filed July 19, 2002 in Japan and No. 2002-211224 filed July 19, 2002 (3 S U.S.C. \$119). opy of the above corresponding foreign application(s) is filed herewith. is NOT to be published under 35 U.S.C. 112(b). The undersigned attorney or agent hereby certifies that sclosed in this application has not been and will not be the subject of an application filing.
⊠ CLA		calculated below: LICATION AFTER ENTRY OF

ANY PRELIMINARY AMENDMENT NOTED ABOVE

OTHER THAN A

				SMALL	ENTITY		SMALL	ENTITY
FOR:	NO. FILED	NO. EXTRA		RATE	FEE	<u>OR</u>	RATE	FEE
BASIC FEE					\$ 375	OR		\$ 750
TOTAL CLAIMS	15 - 20	≈ *0		x 9=	s	OR	x 18	s
INDEP CLAIMS	1 - 3	= *0		x 42 =	s	<u>OR</u>	x 84	s
☐ MULTIPLE DEPENDENT CLAIMS PRESENTED				+ 140 =	s	<u>OR</u>	+ 280	s
* If the difference is	less than zero, en	iter "0".		TOTAL	s	OR	TOTAL	\$ 750

Check No. 144280 in the amount of \$750 to cover the filing fee is attached. Except as otherwise noted herein, the Commissioner is hereby authorized to charge any other fees that may be required to complete this filing, or to credit any overpayment, to Deposit Account No. 15-0461. Two duplicate copies of this sheet are attached.

Respectfully submitted,

gistration No.

Joel S. Armstrong Registration No. 36,430

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		PLICATION AFTER ENTRY OF

ANY PRELIMINARY AMENDMENT NOTED ABOVE

NO. FILED

15 - 20

SMALL ENTITY RATE FEE OR \$ 375 <u>OR</u> 9 = \$ <u>OR</u> 42 = S OR + 140 = \$ OR

OR

OTHER THAN A SMALL ENTITY

KAIE	FEE
	\$ 750
x 18	s
x 84	s
+ 280	s
TOTAL	\$ 750

MULTIPLE DEPENDENT CLAIMS PRESENTED

Ø Check No. 144280 in the amount of \$750 to cover the filing fee is attached. Except as otherwise noted herein, the Commissioner is hereby authorized to charge any other fees that may be required to complete this filing, or to credit any overpayment, to Deposit Account No. 15-0461. Two duplicate copies of this sheet are attached.

NO. EXTRA

*0

*0

Respectfully submitted. Oliff

TOTAL \$

Registration No. 27,075 Joel S. Armstrong Registration No. 36,430

FOR:

TOTAL CLAIMS

INDEP CLAIMS

BASIC FEE

^{*} If the difference is less than zero, enter "0".